



General Assembly

January Session, 2011

***Raised Bill No. 6359***

LCO No. 2723

\*02723\_\_\_\_\_HS\_\*

Referred to Committee on Human Services

Introduced by:  
(HS)

***AN ACT CONCERNING MEDICAL ASSISTANCE FOR FORMER  
FOSTER YOUTH.***

Be it enacted by the Senate and House of Representatives in General Assembly convened:

1 Section 1. Section 17b-261 of the general statutes is repealed and the  
2 following is substituted in lieu thereof (*Effective July 1, 2011*):

3 (a) Medical assistance shall be provided for any otherwise eligible  
4 person whose income, including any available support from legally  
5 liable relatives and the income of the person's spouse or dependent  
6 child, is not more than one hundred forty-three per cent, pending  
7 approval of a federal waiver applied for pursuant to subsection (e) of  
8 this section, of the benefit amount paid to a person with no income  
9 under the temporary family assistance program in the appropriate  
10 region of residence and if such person is an institutionalized  
11 individual as defined in Section 1917(c) of the Social Security Act, 42  
12 USC 1396p(c), and has not made an assignment or transfer or other  
13 disposition of property for less than fair market value for the purpose  
14 of establishing eligibility for benefits or assistance under this section.  
15 Any such disposition shall be treated in accordance with Section  
16 1917(c) of the Social Security Act, 42 USC 1396p(c). Any disposition of

17 property made on behalf of an applicant or recipient or the spouse of  
18 an applicant or recipient by a guardian, conservator, person  
19 authorized to make such disposition pursuant to a power of attorney  
20 or other person so authorized by law shall be attributed to such  
21 applicant, recipient or spouse. A disposition of property ordered by a  
22 court shall be evaluated in accordance with the standards applied to  
23 any other such disposition for the purpose of determining eligibility.  
24 The commissioner shall establish the standards for eligibility for  
25 medical assistance at one hundred forty-three per cent of the benefit  
26 amount paid to a family unit of equal size with no income under the  
27 temporary family assistance program in the appropriate region of  
28 residence. Except as provided in section 17b-277, the medical  
29 assistance program shall provide coverage to persons under the age of  
30 nineteen with family income up to one hundred eighty-five per cent of  
31 the federal poverty level without an asset limit and to persons under  
32 the age of nineteen and their parents and needy caretaker relatives,  
33 who qualify for coverage under Section 1931 of the Social Security Act,  
34 with family income up to one hundred eighty-five per cent of the  
35 federal poverty level without an asset limit. Such levels shall be based  
36 on the regional differences in such benefit amount, if applicable, unless  
37 such levels based on regional differences are not in conformance with  
38 federal law. Any income in excess of the applicable amounts shall be  
39 applied as may be required by said federal law, and assistance shall be  
40 granted for the balance of the cost of authorized medical assistance.  
41 The Commissioner of Social Services shall provide applicants for  
42 assistance under this section, at the time of application, with a written  
43 statement advising them of (1) the effect of an assignment or transfer  
44 or other disposition of property on eligibility for benefits or assistance,  
45 (2) the effect that having income that exceeds the limits prescribed in  
46 this subsection will have with respect to program eligibility, and (3)  
47 the availability of, and eligibility for, services provided by the  
48 Nurturing Families Network established pursuant to section 17b-751b.  
49 Persons who are determined ineligible for assistance pursuant to this  
50 section shall be provided a written statement notifying such persons of

51 their ineligibility and advising such persons of the availability of  
52 HUSKY Plan, Part B health insurance benefits.

53 (b) For the purposes of the Medicaid program, the Commissioner of  
54 Social Services shall consider parental income and resources as  
55 available to a child under eighteen years of age who is living with his  
56 or her parents and is blind or disabled for purposes of the Medicaid  
57 program, or to any other child under twenty-one years of age who is  
58 living with his or her parents.

59 (c) For the purposes of determining eligibility for the Medicaid  
60 program, an available asset is one that is actually available to the  
61 applicant or one that the applicant has the legal right, authority or  
62 power to obtain or to have applied for the applicant's general or  
63 medical support. If the terms of a trust provide for the support of an  
64 applicant, the refusal of a trustee to make a distribution from the trust  
65 does not render the trust an unavailable asset. Notwithstanding the  
66 provisions of this subsection, the availability of funds in a trust or  
67 similar instrument funded in whole or in part by the applicant or the  
68 applicant's spouse shall be determined pursuant to the Omnibus  
69 Budget Reconciliation Act of 1993, 42 USC 1396p. The provisions of  
70 this subsection shall not apply to special needs trust, as defined in 42  
71 USC 1396p(d)(4)(A).

72 (d) The transfer of an asset in exchange for other valuable  
73 consideration shall be allowable to the extent the value of the other  
74 valuable consideration is equal to or greater than the value of the asset  
75 transferred.

76 (e) The Commissioner of Social Services shall seek a waiver from  
77 federal law to permit federal financial participation for Medicaid  
78 expenditures for families with incomes of one hundred forty-three per  
79 cent of the temporary family assistance program payment standard.

80 (f) To the extent permitted by federal law, Medicaid eligibility shall  
81 be extended for one year to a family that becomes ineligible for

82 medical assistance under Section 1931 of the Social Security Act due to  
83 income from employment by one of its members who is a caretaker  
84 relative or due to receipt of child support income. A family receiving  
85 extended benefits on July 1, 2005, shall receive the balance of such  
86 extended benefits, provided no such family shall receive more than  
87 twelve additional months of such benefits.

88 (g) An institutionalized spouse applying for Medicaid and having a  
89 spouse living in the community shall be required, to the maximum  
90 extent permitted by law, to divert income to such community spouse  
91 in order to raise the community spouse's income to the level of the  
92 minimum monthly needs allowance, as described in Section 1924 of  
93 the Social Security Act. Such diversion of income shall occur before the  
94 community spouse is allowed to retain assets in excess of the  
95 community spouse protected amount described in Section 1924 of the  
96 Social Security Act. The Commissioner of Social Services, pursuant to  
97 section 17b-10, may implement the provisions of this subsection while  
98 in the process of adopting regulations, provided the commissioner  
99 prints notice of intent to adopt the regulations in the Connecticut Law  
100 Journal within twenty days of adopting such policy. Such policy shall  
101 be valid until the time final regulations are effective.

102 (h) Medical assistance shall be provided, in accordance with the  
103 provisions of subsection (e) of section 17a-6, to any child under the  
104 supervision of the Commissioner of Children and Families who is not  
105 receiving Medicaid benefits, has not yet qualified for Medicaid benefits  
106 or is otherwise ineligible for such benefits. Medical assistance shall also  
107 be provided to any child in the voluntary services program operated  
108 by the Department of Developmental Services who is not receiving  
109 Medicaid benefits, has not yet qualified for Medicaid benefits or is  
110 otherwise ineligible for benefits. Medical assistance shall be provided  
111 for any person between the ages of twenty-one to twenty-five,  
112 inclusive, who (1) was under the supervision of the Commissioner of  
113 Children and Families and in foster care on or after such person's  
114 eighteenth birthday, and (2) received benefits under the Medicaid

115 program while in foster care. To the extent practicable, the  
116 Commissioner of Children and Families and the Commissioner of  
117 Developmental Services shall apply for, or assist such child in  
118 qualifying for, the Medicaid program.

119 (i) The Commissioner of Social Services shall provide Early and  
120 Periodic Screening, Diagnostic and Treatment program services, as  
121 required and defined as of December 31, 2005, by 42 USC 1396a(a)(43),  
122 42 USC 1396d(r) and 42 USC 1396d(a)(4)(B) and applicable federal  
123 regulations, to all persons who are under the age of twenty-one and  
124 otherwise eligible for medical assistance under this section.

This act shall take effect as follows and shall amend the following sections:		
---	--	--

Section 1	July 1, 2011	17b-261
-----------	--------------	---------

***Statement of Purpose:***

To permit former foster youth to remain eligible for Medicaid until the age of twenty-six.

*[Proposed deletions are enclosed in brackets. Proposed additions are indicated by underline, except that when the entire text of a bill or resolution or a section of a bill or resolution is new, it is not underlined.]*